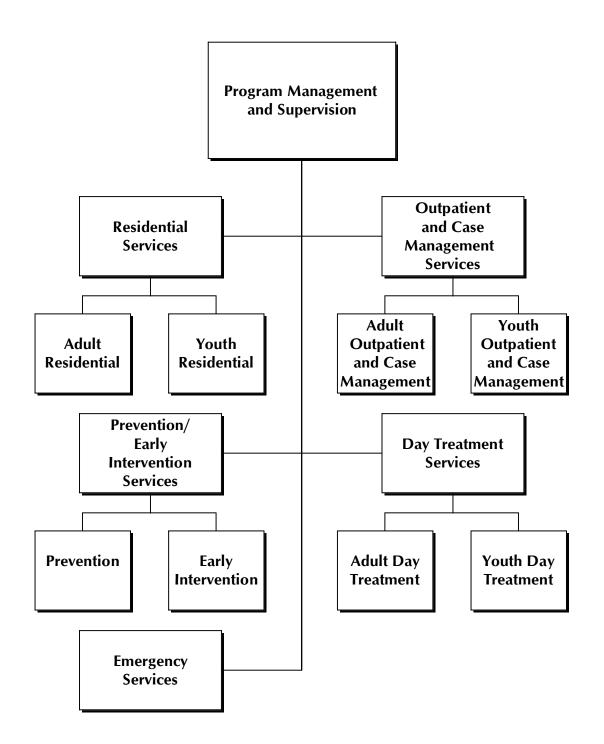
Fund 106 Community Services Board (CSB) - Alcohol and Drug Services



#### Mission

To reduce the incidence and prevalence of alcohol and drug abuse in Fairfax County and in the cities of Fairfax and Falls Church by providing prevention, treatment and rehabilitation services to individuals and their families who abuse and/or are addicted to alcohol and drugs.

### **Focus**

Alcohol and Drug Services (ADS) provides substance abuse prevention, early intervention and treatment services to residents of Fairfax County and the cities of Fairfax and Falls Church. Services are provided through directly-operated programs and contractual providers through six cost centers: Program Management and Supervision, Residential, Outpatient and Case Management, Prevention/Early Intervention, Day Treatment and Emergency Services.

Two new revenue sources will be available effective July 1, 2007 for the expansion of substance abuse treatment services. First, the State authorized Substance Use Disorder as a primary diagnosis for purposes of establishing Medicaid eligibility, assuming the person meets other eligibility requirements. This will result in ADS being able to seek Medicaid reimbursement for substance abuse treatment services for children and adults including emergency services, evaluation and assessments, outpatient services including intensive outpatient services, case management, opioid treatment and day treatment. In order to maximize Medicaid reimbursement and provide much needed services, 5/5.0 SYE new grant positions, fully funded by Medicaid, will be added. In addition, ADS is awaiting notification of its share of \$2.4 million in new state general funds to expand adult and youth services for substance use disorders.

**Program Management and Supervision** provides leadership in the management of services and staff; planning and development of programs; evaluation; quality assurance; and, resource allocation of local, state, federal and grant funds. This cost center also provides volunteer support services and administrative support.

**Residential Services** provides comprehensive services to include individual, group and family therapy; medication management; and case management. Residential treatment settings are matched to the level of care needed by adolescent and adult clients. Treatment services include detoxification, intermediate and long term treatment, supervised apartment programming, supported living services, and aftercare services. Specialized care is provided for clients with co-occurring substance use disorders and mental illness, pregnant and post-partum women, persons whose primary language is Spanish, and persons who are homeless. The CSB has used good business practices to analyze ways Medicaid dollars can be brought in and maximized for funding residential service delivery. For example, in order to maximize Medicaid reimbursement and provide much needed services, 1/1.0 SYE new grant position, fully funded by Medicaid, will be added to Residential Services.

Outpatient and Case Management Services provides case management and individual, group and family counseling for adult and adolescent clients, with specialized care for the dually diagnosed, pregnant and post-partum women, those whose primary language is Spanish and those with HIV/AIDS. Psychiatric consultation to assist in treatment planning and case management is provided. The Fairfax Adult Detention Center provides services that include court-ordered assessments, evaluations, referral to community treatment, as well as direct services within the jail. Services are provided through the Intensive Addictions Program and the True Freedom Program, which is designed for persons who have a co-occurring disorder. Education groups are also provided in English and Spanish. Psychiatric treatment and medication management are provided as needed through the psychiatrist assigned to the jail.

**Prevention/Early Intervention Services** provides education, consultation, training, screening and referral services, as well as specialized programming to at-risk and high-risk populations. Services are offered in the community and reach those that would not usually seek or access services in traditional manners. Early Intervention services are designed to interrupt the cycle of substance use in high-risk adolescents.

**Day Treatment Services** provides daily intensive case management, individual, group and family counseling to substance abusing adults and adolescents who need more intensive services than the standard outpatient treatment services. Psychiatric consultation to assist in treatment planning and case management is provided. Adolescents' services are provided at schools and at the Juvenile Detention Center.

**Emergency Services** provides crisis intervention, assessment, evaluation, case management and emergency substance abuse services for all adult Alcohol and Drug Services programs and provides referrals to private treatment programs when needed. Specialized services are offered to those whose primary language is Spanish and those who are dually diagnosed.

The individuals served throughout these programs include pregnant women, those diagnosed with HIV/AIDS, individuals needing intensive residential treatment services and high-risk youth. These services help the individuals attain recovery from abuse and addiction, increase positive pregnancy outcomes, reduce homelessness, increase work/school/social productivity, reduce criminal justice involvement and reunite families.

# New Initiatives and Recent Accomplishments in Support of the Fairfax County Vision

Maintaining Safe and Caring Communities	Recent Success	FY 2008 Initiative
Continue to host the annual Tim Harmon 5K Run to raise awareness of substance abuse, available services and the disease of Hepatitis.		A
A three-year grant for over \$192,000 from the Virginia Tobacco Settlement Foundation (VTSF) was awarded and began on July 1, 2006. Al's Pals, a preschool substance abuse and violence prevention program, was implemented in 18 classrooms and in 4 preschools/Head Start Programs in Fall 2006. This initiative is expected to reach over 300 3 – 5 year old children annually in FY 2007, FY 2008 and FY 2009.	¥	¥
Continue the Road DAWG (Don't Associate With Gangs) Camp, which expanded in its third year from a single site in the central region of the County to include two new sites, one in the north and one in the south. Programming addresses risk factors associated with gang involvement, substance use and other delinquent behaviors. The Camp is a collaborative project among the Fairfax County Police Department, CSB, Community and Recreation Services, Juvenile and Domestic Relations District Court and Fairfax County Public Schools.	ð	ð
Continue Smart Kids/Safe Choices to deliver violence/gang prevention programming to older elementary-age children and to build community capacity to deliver prevention programming in general. CSB trains partner nonprofit organizations, and provides materials and a stipend for successful program completion. Funding is provided through the Office of the County Gang Prevention Coordinator with a grant from the Department of Criminal Justice Services. Five partners have successfully completed Smart Kids, and four more have implemented the program.	ð	ð

Maintaining Safe and Caring Communities	Recent Success	FY 2008 Initiative
Continue in tandem the multi-week programs Get Real About Violence (GRAV), targeting youth, and Guiding Good Choices (GGC), targeting parents. GRAV encourages youth to change norms that promote and perpetuate violence and addresses factors that put them at risk for violence. GGC teaches parents to set clear guidelines, to help their children develop healthy behaviors and to increase their involvement in the family. GRAV was provided at 12 sites throughout the County, serving 242 youth in FY 2006. Five GGC train-the-trainer sessions were conducted and significantly increased the capacity of the community to provide the program.	ď	ð
Continue <i>Over Time</i> , an after-school, multi-week program for youth focusing on media literacy and social norms to reduce availability and use of substances, including tobacco. Fifty-five young people were served in four groups in FY 2006. Evaluation results indicate significant gains in decision making, and understanding of the risks and perception of drug use. Outcomes also show a decrease in violent behavior.	Ĭ	ð
Expand the Leadership and Resiliency Program (LRP) and the Student Assistance Program (SAP), which are intensive, school-based programs, to a total of 12 Fairfax County public high schools. LRP is currently offered in six high schools, and is a substance abuse and violence prevention program for high school students and participants discover and strengthen personal resiliency traits, including goal setting, healthy relationships, and coping skills. LRP held 329 sessions for 133 high school students in two alternative high schools and four mainstream high schools. SAP is currently implemented in eight high schools, and is an alcohol and drug screening, assessment, and early intervention program serving adolescents and their families.	ď	
Continue ADS Youth Drug Court, a collaborative effort between the Fairfax County Juvenile and Domestic Relations Court and Alcohol and Drug Services. Programming provides adolescent care for substance abuse disorder issues, with support and immediate sanctions for individual accomplishments and difficulties in treatment. Five adolescents graduated from the Youth Drug Court program in FY 2006. The Youth Drug Court program averages 10 youth in programming throughout the year.	¥	ð
Continue Youth Outpatient Services best practice incorporation of Solution Focused Therapy throughout the continuum of services. This approach focuses on strengths and abilities of youth and supports and encourages them in these areas to help identify a healthy lifestyle.		ď

Maintaining Safe and Caring Communities	Recent Success	FY 2008 Initiative
Continue to redesign the delivery of psychiatric services to address the mental health needs of clients with co-occurring mental health and substance abuse disorders.		
<ul> <li>To achieve this goal, an ADS physician position was established to address client psychiatric needs and agency medical procedures.</li> </ul>		
<ul> <li>In addition, ADS expanded the practice of prescribing psychiatric medications for individuals with co-occurring disorders to the Falls Church/Fairfax Outpatient sites and the Day Treatment Programs, with plans to expand the practice of prescribing psychiatric medications for individuals with co-occurring disorders to the South County Outpatient site.</li> </ul>	✓	M
<ul> <li>Established a pilot program at the Crossroads Adult Residential Program for use of the medication, buprenorphine, to assist opiate dependent clients toward recovery.</li> </ul>		
Completed the Outpatient 'Moving Forward Initiative' that established standardized and client-centered services that meet individual client needs consisting of education, counseling and relapse prevention. In addition, established a comprehensive orientation package for clients entering outpatient treatment.		
Implemented the evidence-based practice of motivational interviewing at A New Beginning residential treatment program. Evaluated the effectiveness of the programming by assessing client outcomes/improvements and made enhancements where appropriate.		
Established a continuum of women's services between Recovery Women's Center day treatment services and New Generations residential treatment services. Redesigned the New Generations residential treatment program for women who are pregnant or postpartum and their children to allow for an intermediate length of stay to address the needs of population.		
Re-established the Jail Diversion program to divert individuals in the community requiring alcohol and drug services from jail to treatment. This is a collaborative project with the Fairfax County Police Department and the Office of the Sheriff. In FY 2006, there were a total of 341 admissions to this program.	Ø	

Creating a Culture of Engagement	Recent Success	FY 2008 Initiative
Continue to extensively collaborate with Mental Health Services on Systems Transformation, a service model redesign process, regarding services for clients with co-occurring disorders.	V	¥
Concluded the third and final year of the Regional Tobacco Initiative (Alexandria, Arlington, Fairfax-Falls Church, Loudoun, and Prince William) to prevent tobacco use by children and to build overall prevention capacity in faith-based and community-based organizations. The initiative was funded by a Virginia Tobacco Settlement Foundation grant. The curriculum employed by the initiative was Get Real About Tobacco (GRAT), a model program designed to strengthen refusal skills as well as knowledge of and attitudes toward tobacco. In FY 2006, 20 GRAT groups were completed, serving 362 children.	¥	
Continue the transitional housing program for Latino men who complete the regional Latino residential treatment program. Continuing care services are offered for these individuals to assist them in their transition back into the community. It is expected that 10 to 13 clients will be served by this program in FY 2007.	ď	✓
<b>Exercising Corporate Stewardship</b>	Recent Success	FY 2008 Initiative
The Volunteer and Intern Program will continue recruiting qualified interns in FY 2008. The program recruited and placed 92 individuals in the agency in FY 2006. Sixty were interns from area colleges and universities, and 32 volunteers were members of the community seeking to augment services throughout the treatment continuum. The volunteers and interns provided 18,388 hours of service during the year, including curriculum development, trainings, workshops, transportation and clinical services.	ď	B
Continue the liaison work with Department of Family Services; the Virginia Department of Corrections, Department of Parole and Probation; and the Alcohol Safety Action Program (ASAP) to ensure systemic collaboration and efficiency. Conducted Quality Assurance Utilization Review via an extensive inter-agency Focus Group Project.	Ø	ð
Continue to establish the infrastructure and process for billing Medicare Part D and Medicaid for services for eligible clients, some with co-occurring disorders. Effective July 1, 2007, the State will provide Medicaid coverage of substance abuse treatment services for children and adults including emergency services, evaluation and assessments, outpatient services including intensive outpatient services, case management, opioid treatment and day treatment.	¥	Ø
Continue to provide <i>Girl Power</i> programming and the provisions of technical assistance to service providers from private/nonprofit agencies facilitating the program for capacity building and sustainability. This effort will allow the CSB Prevention Division to collaborate with service providers in the areas of providing training and technical assistance for replication and expansion of services. Staff will play a vital role in increasing the public knowledge about substance abuse awareness and available resources.	¥	¥

<b>Exercising Corporate Stewardship</b>	Recent Success	FY 2008 Initiative
Continue a contract with the Virginia Department of Corrections, Department of Parole and Probation to provide relapse prevention services for offenders in need of that specialized service.	V	
After a need was identified in the Culmore community of Falls Church, work began with representatives of the Department of Family Services and the Culmore community for a pilot program offering substance abuse education, outreach and case management. Continue the pilot program as the effectiveness of this program will impact services to communities in need in the future.	¥	ð
Continue to assist Crossroads Adult and Youth Residential programs to meet accreditation standards outlined by the commission on Accreditation of Rehabilitation Facilities (CARF). CARF standards are best practices and could increase funding reimbursement from Medicaid and third-party payers. Sunrise Youth Residential program maintained CARF accreditation throughout FY 2006.	ď	ð
Through redesign of existing resources, continue a transitional living apartment program for clients of the Cornerstones Program, which allows them to transition to supportive, less restrictive, and more independent living arrangements.		Y

# Budget and Staff Resources 🎁 📆 🛱 🟛





Agency Summary							
Category	FY 2006 Actual	FY 2007 Adopted Budget Plan	FY 2007 Revised Budget Plan	FY 2008 Advertised Budget Plan	FY 2008 Adopted Budget Plan		
Authorized Positions/Staff Years							
Regular	312/ 309.5	312/ 309.5	318/ 315.5	313/ 310.5	318/ 315.5		
Grant	9/ 8.75	9/ 8.75	8/ 7.75	9/ 8.75	14/ 13.75		
Expenditures:							
Personnel Services	\$22,223,282	\$24,010,939	\$24,012,149	\$25,299,103	\$25,546,504		
Operating Expenses	5,538,318	5,322,921	6,097,910	4,959,665	4,959,665		
Capital Equipment	185,135	0	120,000	0	0		
Subtotal	\$27,946,735	\$29,333,860	\$30,230,059	\$30,258,768	\$30,506,169		
Less:							
Recovered Costs	(\$15,933)	\$0	\$0	\$0	\$0		
Total Expenditures	\$27,930,802	\$29,333,860	\$30,230,059	\$30,258,768	\$30,506,169		
Revenue:							
Fairfax County	\$18,645,580	\$21,028,386	\$21,165,182	\$21,996,700	\$21,996,700		
Fairfax City	235,620	235,620	235,620	235,620	235,620		
Falls Church City	118,355	118,355	118,355	118,355	118,355		
State DMHMRSAS	3,152,232	3,139,116	3,273,508	3,272,668	3,272,668		
State Other	140,803	131,037	197,657	197,801	197,801		
Federal Block Grant	3,300,155	3,195,541	3,368,667	3,201,846	3,201,846		
Federal Other	628,846	253,332	981,966	299,332	299,332		
Medicaid Option	102,600	15,480	42,422	103,014	350,415		
Program/Client Fees	764,776	672,363	679,113	679,113	679,113		
CSA Pooled Funds	328,476	440,311	0	0	0		
Miscellaneous	49,560	104,319	104,319	154,319	154,319		
Fund Balance	463,799	0	63,250	0	0		
Total Revenue	\$27,930,802	\$29,333,860	\$30,230,059	\$30,258,768	\$30,506,169		

### **FY 2008 Funding Adjustments**

The following funding adjustments from the FY 2007 Revised Budget Plan are necessary to support the FY 2008 program:

### **Employee Compensation**

\$1,457,712

A total increase of \$1,457,712 in Personnel Services is associated with salary adjustments necessary to support the County's compensation program.

#### **Personnel Services Reduction**

(\$499,147)

A decrease of \$499,147 in Personnel Services as part of an across-the-board reduction to meet budget limitations based on available revenues as a result of a flattening residential real estate market.

### ♦ Leadership and Resiliency and Student Assistance Programs

\$550,000

An increase of \$550,000, comprised of \$410,466 in Personnel Services and \$139,534 in Operating Expenses, is associated with the expansion of the Leadership and Resiliency and Student Assistance Programs to a total of 12 Fairfax County public high schools. The Leadership and Resiliency Program is currently offered in six high schools and is a school- and community-based substance abuse and violence prevention program for high school students. The Student Assistance Program is currently implemented in eight high schools and is a school-based alcohol and drug screening, assessment and early intervention program that serves youth. Funding for an expansion through contracted services was included as part of the FY 2007 Adopted Budget Plan, but due to the time frame involved in approving the RFP and subsequent discussion concerning alternatives to contracted services, the expansion has not occurred. Based on continued Board of Supervisors support of the expansion, 5/5.0 SYE positions have been included in the FY 2007 Third Quarter Review to allow the CSB to begin the expansion.

#### ♦ Hypothermia Response Program

\$101,528

An increase of \$101,528 in Personnel Services is included for the 1/1.0 SYE Substance Abuse Counselor III for the Hypothermia Response Program. This position, along with 1/1.0 SYE Mental Health Therapist in Mental Health Services, supports the efforts of the hypothermia services contractor and the faith-based volunteers in the expanded Hypothermia Response Program. This funding was previously included in the Department of Family Services. For more information on the Hypothermia Response Program, please refer to the DFS narrative in the Health and Welfare program area section of Volume 1.

#### **♦** Medicaid Grant Position

\$60,592

An increase of \$60,592 in Personnel Services is associated with the establishment of a 1/1.0 SYE new Medicaid grant position for intensive case management, residential intensive care and supported living. These expenses are completely offset by additional Medicaid revenue and maximize the recovery of state Medicaid dollars for Alcohol and Drug Services.

#### **♦** Contract Rate Increases

\$43,268

An increase of \$43,268 in Operating Expenses is associated with a 2.66 percent contract rate increase for providers of contracted alcohol and drug treatment services.

#### **♦** Intergovernmental Charges

\$11,042

An increase of \$11,042 in Operating Expenses is due to Department of Vehicle Services charges based on anticipated charges for fuel, vehicle replacement, and maintenance.

#### **♦** Carryover and Other Adjustments

(\$946,361)

A decrease of \$946,361 in Operating Expenses is attributable to encumbered carryover, non-recurring grant adjustments, and other miscellaneous adjustments.

#### **♦** Grant Adjustments

(\$682,490)

A net decrease of \$682,490 for ongoing grant adjustments is comprised of decreases of \$682,633 for HIDTA and \$2,912 for Al's Pals, offset by an increase of \$3,055 for Day Reporting. More specifically, this is a decrease of \$244,197 in Personnel Services and a decrease of \$438,293 in Operating Expenses.

### **Board of Supervisors' Adjustments**

The following funding adjustments reflect all changes to the <u>FY 2008 Advertised Budget Plan</u>, as approved by the Board of Supervisors on April 30, 2007:

#### **♦** Medicaid Grant Positions

\$247,401

An increase of \$247,401 in Personnel Services with a commensurate revenue adjustment is needed to appropriate additional Medicaid revenue to provide substance abuse treatment services for children and adults, including emergency services, evaluation and assessment, outpatient services, case management, opioid treatment, and day treatment. Funding will support 3/3.0 SYE grant Substance Abuse Counselor positions and 2/2.0 SYE grant Senior Clinician positions to provide the increased and/or enhanced substance abuse treatment services for Medicaid eligible consumers.

### **Changes to FY 2007 Adopted Budget Plan**

The following funding adjustments reflect all approved changes in the FY 2007 Revised Budget Plan since passage of the FY 2007 Adopted Budget Plan. Included are all adjustments made as part of the FY 2006 Carryover Review and all other approved changes through December 31, 2006:

#### **♦** Carryover Adjustments

\$828,764

As part of the FY 2006 Carryover Review, an increase of \$828,764 is comprised of a \$749,254 adjustment to grant awards and a non-grant adjustment of \$79,510. The grant adjustments include \$682,634 for the High Intensity Drug Trafficking Area grant and \$66,620 for Al's Pals. The non-grant net adjustment of \$79,510 is comprised of increases of \$315,348 for the Jail Diversion Program; \$77,226 to appropriate additional state revenue for regional co-occurring disorders services and postpartum women services; \$63,247 in Operating Expenses for encumbered items; \$46,000 to appropriate additional federal revenue for the Food Stamp/Paypoint electronic benefit program; \$40,000 to appropriate additional federal revenue for substance abuse/mental health co-occurring residential treatment; \$23,000 to appropriate additional federal revenue for VASIP training and consultative projects; offset by decreases of \$45,000 for Maury Place rental payments and \$440,311 due to a suspension of services at Sunrise II. More specifically, a \$1,210 adjustment is reflected in Personnel Services and \$827,554 is shown in Operating Expenses.

The following funding adjustments reflect all approved changes to the FY 2007 Revised Budget Plan from January 1, 2007 through April 23, 2007. Included are all adjustments made as part of the FY 2007 Third Quarter Review:

### Grant Adjustments

\$67,435

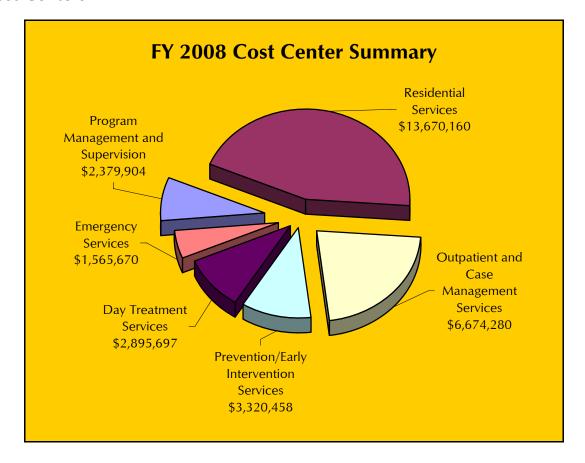
An increase of \$67,435 in Operating Expenses with a commensurate revenue adjustment is required to appropriate additional federal Block Grant funding for Virginia Service Integration Program regional training and materials.

#### **♦ LRP and SAP Positions**

**\$**0

An increase of 5/5.0 SYE new counselor positions will help expand the Leadership and Resiliency and Student Assistance Programs to a total of 12 Fairfax County public high schools. The Leadership and Resiliency Program is a school- and community based substance abuse and violence prevention program for high school students and is currently implemented in six high schools by 3/3.0 SYE counselors and 1/1.0 SYE supervisor. The Student Assistance Program is a school-based alcohol and drug screening, assessment and early intervention program that serves youth and is currently implemented in eight high schools by 8/8.0 SYE counselors and 1/1.0 SYE supervisor. As presented to the Human Services and Housing Committees of the Board of Supervisors on January 19, 2007, funding from the agency's current FY 2007 Revised Budget Plan will support these new positions.

### **Cost Centers**





Funding Summary									
FY 2007 FY 2007 FY 2008 FY 2008 FY 2006 Adopted Revised Advertised Adopted Category Actual Budget Plan Budget Plan Budget Plan									
Authorized Positions/Staff Years									
Regular	32/ 31.5	32/ 31.5	33/ 32.5	33/ 32.5	33/ 32.5				
Total Expenditures	\$3,075,966	\$2,219,384	\$2,403,372	\$2,379,904	\$2,379,904				

	Position Summary							
1	Director, Alcohol and Drug Programs	1	Volunteer Services Coordinator II	14	Administrative Assts. III, 1 PT			
5	Substance Abuse Counselors V	1	Business Analyst II	1	Administrative Asst. II			
1	Substance Abuse Counselor IV	1	Administrative Associate	1	SAS Aide			
2	Substance Abuse Counselors III	5	Administrative Assistants IV					
TOT	TOTAL POSITIONS							
33 F	33 Positions / 32.5 Staff Years PT Denotes Part-Time Position							

### **Key Performance Measures**

#### Goal

To provide program management, quality assurance, evaluation, administrative support and volunteer support services for the agency's alcohol and substance abuse treatment programs.

### **Objectives**

♦ To provide direction and management support to Alcohol and Drug Services programs so that 80 percent of service quality and outcome goals are achieved.

		Prior Year Actu	Current Estimate	Future Estimate	
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Outcome:					
Percent of ADS program performance indicators (service quality and outcome) achieved	81.3%	87.5%	80.0% / 87.5%	80.0%	80.0%

#### **Performance Measurement Results**

In FY 2006, 14 out of 16 or 87.5 percent of service quality and outcome goals were met by Alcohol and Drug Services thereby exceeding the target of 80 percent. The performance measures are designed to measure service satisfaction, access to services, client service delivery, client productivity in school and/or work, and reduction of illegal substance use. ADS will use the results of the FY 2006 performance measures to engage in continuous quality improvement activities throughout FY 2008.

### **Residential Services**

Funding Summary								
FY 2007 FY 2008 FY 2008 FY 2006 Adopted Revised Advertised Adopted Category Actual Budget Plan Budget Plan Budget Plan								
Authorized Positions/Staff Years								
Regular	148/ 147	148/ 147	147/ 146	147/ 146	147/ 146			
Grant	2/2	2/2	1/ 1	2/2	2/ 2			
Total Expenditures	\$13,093,278	\$13,325,412	\$13,678,839	\$13,670,160	\$13,670,160			

			Position Summary		
	Social Detoxification		Long-Term Rehabilitation - Crossroads		Intermediate Rehabilitation -
1	Public Health Doctor, PT	1	Substance Abuse Counselor IV		A New Beginning
1	Public Health Nurse III	3	Substance Abuse Counselors III	1	Substance Abuse Counselor IV
4	Public Health Nurses II	10	Substance Abuse Counselors II	3	Substance Abuse Counselors III
1	Nurse Practitioner	3	Substance Abuse Counselors I	7	Substance Abuse Counselors II
1	Substance Abuse Counselor IV	1	Assistant Residential Counselor	6	Substance Abuse Counselors I
3	Substance Abuse Counselors III	1	Public Health Nurse II	1	Food Service Specialist
8	Substance Abuse Counselors II	2	Nurse Practitioners	4	Cooks
9	Substance Abuse Counselors I	1	Administrative Assistant V	1	Administrative Assistant V
1	SAS Aide	1	Food Service Specialist	2	SAS Aides
1	Psychiatrist	2	SAS Aides		
	,				Intermediate Rehabilitation -
	Steps to Recovery		Supported Living		Sunrise House I
1	Substance Abuse Counselor III	1	Substance Abuse Counselor IV	1	Substance Abuse Counselor IV
3	Substance Abuse Counselors II	3	Substance Abuse Counselors III	2	Substance Abuse Counselors III
1	Substance Abuse Counselor I	5	Substance Abuse Counselors II	6	Substance Abuse Counselors II
				2	Substance Abuse Counselors I
	Intermediate Rehabilitation -		Long-Term Rehabilitation -	1	SAS Aide
	Sunrise House II		New Generations		
		1	Substance Abuse Counselor IV		Long-Term Rehabilitation -
3	Substance Abuse Counselors II	1	Substance Abuse Counselor III		Crossroads Youth
3	Substance Abuse Counselors I	2	Substance Abuse Counselors II	1	Substance Abuse Counselor IV
		4	Substance Abuse Counselors I	2	Substance Abuse Counselors III
	Dual Diagnosis Facility -	1	Senior Clinician	6	Substance Abuse Counselors II
	Cornerstones	2	Day Care Center Teachers I, 1 PT	5	Substance Abuse Counselors I
1	Substance Abuse Counselor IV	1	SAS Aide		
1	Substance Abuse Counselor III				
3	Substance Abuse Counselors II				
1	Substance Abuse Counselor I				
1	Food Service Specialist				
1	Cook				
1	SAS Aide				
l			<b>Grant Positions</b>		
	Long-Term Rehabilitation -		Steps to Recovery - HUD		
	New Generations	1	Substance Abuse Counselor II		
1	Substance Abuse Counselor I (1)				
	AL POSITIONS				
	Positions / 146.0 Staff Years				Penotes New Position
2 G	rant Positions (1) / 2.0 Staff Years (1.0)			PT I	Denotes Part-Time Position

### **Key Performance Measures**

### Goal

To provide detoxification services, intermediate and long-term residential substance abuse treatment services for adults, adolescents, pregnant women and mothers with infant children in order to improve their overall functioning in the community.

### **Objectives**

- ♦ To provide substance abuse treatment to clients in the Crossroads program so that 80 percent of clients receiving at least 90 days of treatment are either employed or in school upon leaving the program.
- ♦ To provide substance abuse treatment to clients in the Intermediate Rehabilitation Services (Phoenix) program so that 80 percent of clients receiving at least 30 days of treatment are either employed or are in school upon leaving the program.

		Prior Year Actu	Current Estimate	Future Estimate	
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Output:					
Crossroads - Clients served	146	163	155 / 155	155	155
Intermediate Rehabilitation - Clients served	30	24	24 / 38	24	23
Efficiency:					
Crossroads - Cost per client	\$12,098	\$10,797	\$13,209 / \$8,811	\$10,015	\$10,589
Intermediate Rehabilitation - Cost per client	\$4,324	\$6,037	\$7,864 / \$3,859	\$8,067	\$3,838
Service Quality:					
Crossroads - Percent of clients satisfied with services	96%	90%	90% / 97%	90%	90%
Intermediate Rehabilitation - Percent of clients satisfied with services	80%	91%	85% / 84%	85%	90%
Outcome:			,		
Crossroads - Percent of clients participating in at least 90 days of treatment who are either employed or in school upon leaving the program	91%	88%	80% / 93%	80%	80%
Intermediate Rehabilitation - Percent of clients receiving at least 30 days of treatment who are either employed or in school					
upon leaving the program	89%	78%	80% / 92%	80%	80%

### **Performance Measurement Results**

In FY 2006, the Crossroads program, which is a long-term residential program, served 155 individuals, meeting the program's projected goal. The program continues to serve individuals with complicated co-occurring mental health and substance use disorders. Individuals with co-occurring disorders generally require longer treatment episodes to adequately address their complex issues. The program has remained at full capacity throughout the year.

Intermediate Rehabilitation, which is a contracted service, served 38 adults. Utilization of this contracted service exceeded the estimate by 14 consumers. More clients were served than projected based on a shift in contract dollars from contracted long-term care to contracted intermediate care. The shift in services was based on presenting clinical placement needs. The estimate for FY 2007 will remain as projected in FY 2006 and decrease slightly in FY 2008 based on the formula used for projections.

Clients continue to report high levels of satisfaction with both the Crossroads and Intermediate Rehabilitation programs. In FY 2006, 97 percent of clients in the Crossroads program were satisfied with services, exceeding the goal of 90 percent. In the Intermediate Rehabilitation program, 84 percent of clients indicated that they were satisfied services, not reaching the goal of 85 percent by only one percentage point.

Of the clients participating in 90 days of service at Crossroads, the program surpassed its target with 93 percent demonstrating improvement in employment/school status. Of the clients that participated in 30 days of service in Intermediate Rehabilitation, 92 percent demonstrated improvement in employment/school status.



Funding Summary							
Category	FY 2006 Actual	FY 2007 Adopted Budget Plan	FY 2007 Revised Budget Plan	FY 2008 Advertised Budget Plan	FY 2008 Adopted Budget Plan		
Authorized Positions/Staff Years							
Regular	60/ 60	60/60	60/60	60/60	60/ 60		
Grant	5/ 4.75	5/ 4.75	5/ 4.75	5/ 4.75	5/ 4.75		
Total Expenditures	\$6,149,523	\$6,283,133	\$6,314,472	\$6,674,280	\$6,674,280		

			Position Summary		
	Adult Outpatient		Youth Outpatient		Community Corrections
3	Senior Clinicians	6	Senior Clinicians	1	Substance Abuse Counselor V
3	Substance Abuse Counselors IV	2	Substance Abuse Counselors IV	1	Substance Abuse Counselor III
5	Substance Abuse Counselors III	4	Substance Abuse Counselors III	4	Substance Abuse Counselors II
20	Substance Abuse Counselors II	11	Substance Abuse Counselors II		
			Grant Positions		
			Youth Outpatient		Community Corrections
		1	Substance Abuse Counselor II	2	Substance Abuse Counselors II, 1 PT
				1	Mental Health Therapist
				1	Mental Health Supv./Spec.
TOT	TAL POSITIONS		PT	Denote	es Part-Time Positions
60 F	Positions / 60.0 Staff Years				
5 <b>G</b> ı	rant Positions / 4.75 Staff Years				

### **Key Performance Measures**

#### Goal

To provide outpatient and case management services that allow people to continue functioning and being productive in their homes, workplace, schools and neighborhoods while receiving treatment.

### **Objectives**

- ♦ To improve the employment and/or school status for 80 percent of adults who participate in at least 30 days of outpatient treatment.
- ♦ To improve the employment and/or school status for 80 percent of youth who participate in at least 30 days of outpatient treatment.

		Prior Year Actu	ıals	Current Estimate	Future Estimate
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Output:					
Adult Outpatient - Clients served	2,372	2,106	2,200 / 1,598	2,000	2,000
Youth Outpatient - Clients served	1,024	1,030	1,000 / 1,066	1,000	1,000
Efficiency:					
Adult Outpatient - Cost per client	\$1,117	\$1,364	\$1,382 / \$1,637	\$1,401	\$1,467
Youth Outpatient - Cost per client	\$2,114	\$2,042	\$2,186 / \$1,066	\$2,236	\$1,888
Service Quality:					
Adult Outpatient - Percent of clients satisfied with services	93%	91%	90% / 95%	90%	90%
Youth Outpatient - Percent of clients satisfied with services	94%	96%	90% / 91%	90%	90%
Outcome:					
Adult Outpatient - Percent of clients showing improvement in their employment and/or school status after 30 days of treatment	78%	80%	80% / 84%	80%	80%
Youth Outpatient - Percent of clients showing improvement in their employment and/or school status after 30 days of treatment	96%	84%	80% / 97%	80%	80%

### **Performance Measurement Results**

In FY 2006, fewer adult clients were served than originally estimated in this cost center. Adult Outpatient Services re-tooled treatment programming to accommodate more individuals with co-occurring substance use and mental health disorders. Consumers with co-occurring disorders generally require a longer treatment episode because of the complexity of issues, resulting in a reduction of consumer turn-over and the capacity to serve fewer. The output goal has been adjusted to reflect the length of stay required for the consumers. In addition, the cost per client of Adult Outpatient Services exceeded the FY 2006 estimate by 18 percent due to fewer clients served, clients staying in treatment longer and low staff turnover. In contrast, the cost per client for Youth Outpatient Services was 51 percent below the FY 2006 estimate largely due to higher than expected staff vacancies.

Ninety-five percent of adult clients and 91 percent of youth clients were satisfied with services, exceeding the targets of 90 percent. This can be attributed to quality improvement initiatives within the agency that incorporated feedback from narrative portions of previous client satisfaction surveys.

In regards to outcome measures, 84 percent of adults achieved improvement in their employment and/or school status after 30 days of treatment. Ninety-seven percent of youth clients showed improvement, surpassing the target of 80 percent.



Funding Summary							
Category	FY 2006 Actual	FY 2007 Adopted Budget Plan	FY 2007 Revised Budget Plan	FY 2008 Advertised Budget Plan	FY 2008 Adopted Budget Plan		
Authorized Positions/Staff Years							
Regular	29/ 29	29/ 29	35/ 35	30/ 30	35/ 35		
Total Expenditures	\$2,265,029	\$3,383,523	\$3,436,593	\$3,320,458	\$3,320,458		

	Position Summary						
	Alcohol & Drug Prevention		Early Intervention				
1	Substance Abuse Counselor IV	1	Substance Abuse Counselor IV				
2	Substance Abuse Counselors III	2	Substance Abuse Counselors III				
13	Substance Abuse Counselors II	15	Substance Abuse Counselors II				
1	Mental Health Supv./Spec.						
TOT	TOTAL POSITIONS						
35 F	35 Positions / 35.0 Staff Years						

### **Key Performance Measures**

#### Goal

To reduce the incidence of substance abuse, as well as provide community prevention, education, consultation, training and information to business, schools, service providers and residents in order to prevent subsequent alcohol and/or drug abuse.

### **Objectives**

♦ To increase knowledge of healthy lifestyles, substance abuse warning signs and available alcohol and drug abuse resources among 85 percent of participants in prevention education programs.

	Prior Year Actuals			Current Estimate	Future Estimate
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Output:					
Units of service for prevention education services	2,689	2,914	2,800 / 3,541	2,800	3,000
Service Quality:					
Percent of clients satisfied with services	96%	90%	90% / 90%	90%	90%
Outcome:					
Percent of participants with higher post-test scores after completion of prevention education programs	88%	87%	85% / 87%	85%	85%

#### **Performance Measurement Results**

In FY 2006, 3,541 units of service for prevention education services were provided. This is 26 percent higher than the projected goal of 2,800 units of service and is due to increased efficiency and system changes in the Commonwealth of Virginia's Prevention database system which allows staff to more accurately record activities and program delivery of services. Eighty-seven percent of clients demonstrated improved knowledge of healthy lifestyles and the warning signs of substance abuse, exceeding the goal of 85 percent.

### **Day Treatment Services**

Funding Summary							
Category	FY 2006 Actual	FY 2007 Adopted Budget Plan	FY 2007 Revised Budget Plan	FY 2008 Advertised Budget Plan	FY 2008 Adopted Budget Plan		
Authorized Positions/Staff Years							
Regular	25/ 24.5	25/ 24.5	25/ 24.5	25/ 24.5	25/ 24.5		
Grant	2/2	2/2	2/2	2/2	7/7		
Total Expenditures	\$1,937,740	\$2,610,138	\$2,883,673	\$2,648,296	\$2,895,697		

			Position Summary					
	Adult Day Treatment		Youth Day Treatment		Women's Day Treatment			
2	Substance Abuse Counselors III	3	Senior Clinicians	1	Substance Abuse Counselor III			
4	Substance Abuse Counselors II	1	Substance Abuse Counselor III	4	Substance Abuse Counselors II			
		7	Substance Abuse Counselors II	1	Day Care Center Teacher I, PT			
		1	Mental Health Therapist					
		1	Clinical Psychologist					
	Grant Positions							
5	Substance Abuse Counselors II (3)							
2	Senior Clinicians (2)							
	TOTAL POSITIONS							
25 F	Positions / 24.5 Staff Years		PT	Denotes Part-Time Position				
7 <b>G</b> i	rant Positions / 7.0 Staff Years			(	) Denotes New Positions			

### **Key Performance Measures**

#### Goal

To provide intensive alcohol and drug day treatment services five days a week to keep people functional and productive in their homes, workplaces, schools and neighborhoods while receiving treatment.

### **Objectives**

- ♦ To improve the employment and/or school status for 80 percent of adults who participate in at least 90 days of day treatment services.
- ♦ To improve the employment and/or school status for 85 percent of youth who participate in at least 90 days of day treatment services.

		Prior Year Actu	Current Estimate	Future Estimate	
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Output:					
Adult Day Treatment - Clients served	192	154	150 / 132	140	140
Youth Day Treatment - Clients served	136	130	140 / 200	180	180
Efficiency:					
Adult Day Treatment - Cost per client	\$4,951	\$3,050	\$3,837 / \$3,401	\$4,310	\$4,506
Youth Day Treatment - Cost per client	\$6,554	\$6,892	\$6,974 / \$3,407	\$4,309	\$4,560

		Prior Year Actu	ials	Current Estimate	Future Estimate
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Service Quality:					
Adult Day Treatment - Percent of clients satisfied with services	84%	89%	80% / 95%	80%	80%
Youth Day Treatment - Percent of clients satisfied with services	96%	97%	80% / 91%	80%	80%
Outcome:					
Adult Day Treatment - Percent of adults showing improvement in employment and/or school status after 90 days of treatment	64%	61%	75% / 84%	80%	80%
Youth Day Treatment - Percent of youth showing improvement in employment and/or school	020/	020/	000/ / 070/	0.50/	0.50/
status after 90 days of treatment	93%	92%	80% / 97%	85%	85%

### **Performance Measurement Results**

In FY 2006, fewer adult clients were served in day treatment programs and more adolescent were served in day treatment programs than originally projected. The estimate was based on a clarification related to billing issues and State Performance Contract definitions. It is believed that the baseline has been established and more realistic estimates have been projected for FY 2007.

Ninety-five percent of adult clients and 91 percent of youth clients were satisfied with services, exceeding the targets of 80 percent. This can be attributed to quality improvement initiatives within the agency that incorporated feedback from narrative portions of previous client satisfaction surveys.

For adult clients, 84 percent of those served demonstrated improvement in their employment/school status from admission to discharge. It should be noted that this is one of the most difficult populations that the agency serves. It is not unusual that individuals requiring residential care meet residential exclusionary criteria and are subsequently placed in day treatment, which is a lower level of care. Exclusionary criteria include issues related to criminal histories that have the potential of risk of jeopardy to other clients in a residential setting.

Ninety-seven percent of youth clients showed improvement in employment and/or school status, greatly surpassing the target of 80 percent. Youth tend not to present the same residential risk issues that adults do and are more likely to be placed in the level of care needed.

# Emergency Services 📫 🛱

	F	unding Sumi	nary		
Category	FY 2006 Actual	FY 2007 Adopted Budget Plan	FY 2007 Revised Budget Plan	FY 2008 Advertised Budget Plan	FY 2008 Adopted Budget Plan
Authorized Positions/Staff Years					
Regular	18/ 17.5	18/ 17.5	18/ 17.5	18/ 17.5	18/ 17.5
Total Expenditures	\$1,409,266	<b>\$1,512,270</b>	\$1,513,110	<b>\$1,565,670</b>	\$1,565,670

	Position Summary
2 Senior Clinicians	4 Substance Abuse Counselors III
1 Substance Abuse Counselor IV	11 Substance Abuse Counselors II , 1 PT
TOTAL POSITIONS	
18 Positions / 17.5 Staff Years	PT Denotes Part-Time Position

### **Key Performance Measures**

#### Goal

To provide prompt responses to adult clients seeking crisis intervention, assessment, evaluation and/or emergency substance abuse services and provide centralized entry to all Alcohol and Drug Services programs, as well as referrals to private treatment programs when needed.

### **Objectives**

♦ To improve emergency crisis intervention and assessment services so that 85 percent of assessed clients receive the appropriate level of care based on American Society of Addiction Medicines (ASAM) criteria.

	Prior Year Actuals			Current Estimate	Future Estimate
Indicator	FY 2004 Actual	FY 2005 Actual	FY 2006 Estimate/Actual	FY 2007	FY 2008
Output:					
Clients served	1,837	1,987	2,000 / 2,208	2,000	2,271
Efficiency:					
Cost per client	\$669	\$693	\$706 / \$607	\$423	\$403
Service Quality:					
Percent of clients satisfied with services	97%	96%	95% / 98%	95%	95%
Outcome:					
Percent of clients who access the appropriate level of care based on ASAM criteria	89%	87%	85% / 82%	85%	85%

#### **Performance Measurement Results**

In FY 2006, 2,208 clients were served, which exceeded the targeted amount of 2,000 clients. Scheduling of services was adjusted mid-year, which resulted in the increase. In addition, 98 percent of clients reported satisfaction with services, exceeding the goal of 95 percent. The goal for clients accessing the appropriate level of care based on their needs was 85 percent or 1,700 clients. Though the percentage target was not met at 82 percent, with the additional 208 clients served in FY 2006, 1,810 accessed the appropriate level of care based on their needs. The level of severity of individuals being assessed has significantly increased. More individuals with severe co-occurring disorders are being served through the Assessment and Referral Center and many of these individuals are unable to access community care until stabilized in hospitals or crisis care centers.